Under the Paperwork Reduction Act of 1995, no persons are required to response								1000 000 000 000 V					
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1							700 21 21	-					
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1 3	\$	NTATION OF MULTIP	NE DEPEN	DENT CLAIM (37	CFR 1,16(d))	$_{\perp}$	+ 5/5/	<u>'</u> =		٠.٠	TOTAL		
	FIRST PRESE	NIAHUR OF MUCH					TOTAL ADD'L F	EE		OR	ADD'L	FEE (	

"If the entry in column 1 is less than the entry in column 2, while 0 in column 3 if the "Highest Number Previously Paid For IN THIS SPACE is less than 20, enter "20" If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".

The 'Highest Number Previously Paid For' IN THIS SPACE is less than 3, enter '3'.

The 'Highest Number Previously Paid For' (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (are USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any concluding gathering, preparing, and submitting the complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to Chief Information Officer, U on the USPTO in the information of the U

<sup>\*</sup> If the entry in column 1 is less than the entry in column 2, write "0" in column 3

PATENT APPLICATION FEE	DETERMINATIO	N RECORD
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Application or Docket Number

Effective January 1, 2003									10			
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY (			OTHER	OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			26					RATE	FEE		RATE	FEE
FO	R		NUMBER FILED		NUMBER EXTRA			BASIC FEE	375.00	OR	BASIC FEE	750.00
то	TAL CHARGEA	BLE CLAIMS	76 minus 20=		•			X\$ 9=		OR	X\$18=	
מאו	EPENDENT CL	AIMS	4 mir	nus 3 =	*			X42=		OR	X84=	
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT					+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in c					"0" in c	olumn 2	1	TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	* NTATION OF M	Minus	***	CL AUA	=		X42≃		OR	X84=	
L	18,15,21		JUNPLE DEF	ENDEN	CLAIM		3	+140=		OR	+280=	
1	18/1/10/	,						TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colur		(Column 3)		ADDII. I'EE I			robin. 1 EE,	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Š	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	* NTATION OF M	Minus	***	CLAIM	=	┨ ┃	X42=		OR	X84=	
_	- INDITALOE	MATION OF M	JETIPLE DEP	CHUCKI	CEAN	+ _ ]	<b> </b>	+140=		OR	+280=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
_		(Column 1) CLAIMS		(Colur		(Column 3)	١.			1		_
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Š	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=	11	X42=	-	OR	X84=	
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***	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											